Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF OHIO		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: **Identify Yourself** About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Your full name Write the name that is on Paul Sheila your government-issued First name First name picture identification (for example, your driver's Η. license or passport). Middle name Middle name Bring your picture Cerovac, Jr. Cerovac identification to your Last name and Suffix (Sr., Jr., II, III) Last name and Suffix (Sr., Jr., II, III) meeting with the trustee. All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal xxx-xx-1336 xxx-xx-0178 Individual Taxpayer Identification number (ITIN)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	■ I have not used any business name or EINs.			
Include trade names and doing business as names		Business name(s)	Business name(s)			
		EINs	EINs			
5. Where you live		1607 Eastwood Drive Brunswick, OH 44212	If Debtor 2 lives at a different address:			
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Medina County	County			
	If your mailing address is different from the one above, fill it in here. Note that the court will send notices to you at this mailing address.		If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for bankruptcy	 Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) 	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)			

Debtor 1	Paul H. Cerovac, Jr.
Debtor 2	Sheila A Cerovac

Case number (if known)

Par		Your Bankruptcy Case						
7.	The chapter of the Bankruptcy Code you are choosing to file under	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	choosing to me under	■ Cha	apter 7					
		☐ Cha	apter 11					
		☐ Cha	apter 12					
		☐ Cha	apter 13					
8.	How you will pay the fee	_ a	about how y	he entire fee when I file my petition. Please check with the clerk's office in your local court for you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check and reserved address.				
						n, sign and attach the Application for Individuals to Pay		
			•		(Official Form 103A).	a only if you are filing for Chapter 7. By low a judge may		
		t a	out is not rec applies to yo	quired to, waive your family size and	our fee, and may do so only if yo I you are unable to pay the fee in	n only if you are filing for Chapter 7. By law, a judge may, ur income is less than 150% of the official poverty line that installments). If you choose this option, you must fill out ial Form 103B) and file it with your petition.		
9.	Have you filed for bankruptcy within the last 8 years?	■ No.						
	,	00	District		When	Case number		
			District		When	Case number		
			District		When	Case number		
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	■ No						
			Debtor			Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
11.	Do you rent your residence?	■ No.	Go to	line 12.				
	residence?	☐ Yes	. Has y	our landlord obtair	ned an eviction judgment agains	t you?		
				No. Go to line 12	2.			
				Yes Fill out Initi	al Statement About an Eviction	Judgment Against You (Form 101A) and file it as part of		

	otor 1 Paul H. Cerovac, Ji tor 2 Sheila A. Cerovac	r.		Case number (if known)
Par	Report About Any Bu	sinesses	You Own	as a Sole Proprietor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.
		☐ Yes.	Name	and location of business
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, State & ZIP Code
	it to this petition.		Checi	k the appropriate box to describe your business:
				Health Care Business (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as defined in 11 U.S.C. § 101(53A))
				Commodity Broker (as defined in 11 U.S.C. § 101(6))
				None of the above
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines	s. If you in s, cash-fl	der Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate idicate that you are a small business debtor, you must attach your most recent balance sheet, statement of ow statement, and federal income tax return or if any of these documents do not exist, follow the procedure 1)(B).
	For a definition of small	■ No.	I am r	not filing under Chapter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code.	iling under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am f	iling under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	Have Any	Hazardo	ous Property or Any Property That Needs Immediate Attention
14.	Do you own or have any	■ No.		
	property that poses or is alleged to pose a threat	☐ Yes.		
	of imminent and identifiable hazard to public health or safety?		What is	the hazard?
	Or do you own any property that needs immediate attention?			liate attention is why is it needed?
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs		Where is	s the property?

urgent repairs?

Number, Street, City, State & Zip Code

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15

☐ I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Official Form 101

Debtor 1	Paul H. Cerovac, Jr.
Debtor 2	Sheila A. Cerovac

Case number (if known)

Par	6: Answer These Quest	ions for R	eporting Purposes						
16.	What kind of debts do you have?	16a.	ed in 11 U.S.C. § 101(8) as "incurred by an						
			☐ No. Go to line 16b.						
			Yes. Go to line 17.						
		16b.	16b. Are your debts primarily business debts? <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.						
			☐ No. Go to line 16c.						
			☐ Yes. Go to line 17.						
		16c.	State the type of debts you owe th	at are not consu	mer debts or business	debts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. Go	o to line 18.					
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. Do you are paid that funds will be available			rty is excluded and administrative expenses			
	administrative expenses		■ No						
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes						
18.	How many Creditors do	1 -49		1 ,000-5,000	1	☐ 25,001-50,000			
	you estimate that you owe?	☐ 50-99		5001-10,000		5 0,001-100,000			
		☐ 100-1 ☐ 200-9		□ 10,001-25,0	00	☐ More than100,000			
19.	How much do you	□ \$0 - \$	50,000	□ \$1,000,001	- \$10 million	□ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million		☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
			001 - \$500,000 001 - \$1 million						
20.	How much do you	□ \$0 - \$,	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million		☐ \$500,000,001 - \$1 billion			
	estimate your liabilities to be?		001 - \$100,000			\$1,000,000,001 - \$10 billion			
		■ \$100,001 - \$500,000 □ \$500,001 - \$1 million		☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million		☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion			
Par	7: Sign Below								
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.							
				apter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, d the relief available under each chapter, and I choose to proceed under Chapter 7.					
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).							
		I request	I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.						
		bankrupt and 357	I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.						
			H. Cerovac, Jr.		/s/ Sheila A. Cerov				
			Cerovac, Jr. e of Debtor 1		Sheila A. Cerovac Signature of Debtor				
		Executed	MM / DD / YYYY		Executed on Nove	ember 1, 2019 DD / YYYY			

Debtor 1	Paul H. Cerovac, Jr.
Debtor 2	Sheila A. Cerovac

r (if known)	
	er (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Christopher L. Wetherbee Signature of Attorney for Debtor	Date	November 1, 2019 MM / DD / YYYY
Christopher L. Wetherbee		
Oberholtzer & Filous, LPA		
39 Public Square, Suite 201 Medina, OH 44258-0220 Number, Street, City, State & ZIP Code		
Contact phone 330-725-4929	Email address	counsel@medinalaw.com
0086915 OH Bar number & State		

Eill	in this informatio	n to identify your o	•			
		n to identify your c				
Dec		aul H. Cerovac, Jr	Middle Name	Last Name		
1		heila A. Cerovac	Middle Name	Last Name		
` `	, 3 ,		NORTHERN DISTRIC			
Uniii	ed States Bankrup	olcy Court for the.	NORTHERN DISTRIC	or Onio		
Cas (if kn	e number				□ Ch	eck if this is an
					_	ended filing
Of	icial Form	106Sum				
Su	mmary of Y	our Assets a	nd Liabilities a	nd Certain Statistical Informatio	n	12/15
infor	mation. Fill out a original forms, y	ll of your schedule	s first; then complete	le are filing together, both are equally responsible the information on this form. If you are filing amout the box at the top of this page.		
ı aı	. Odminarize	Tour Assets			V	
						r assets le of what you own
1.		Property (Official Fo				400,000,00
	1a. Copy line 55,	Total real estate, fro	om Schedule A/B		\$ _	163,030.00
	1b. Copy line 62,	Total personal prop	erty, from Schedule A/E	3	\$ _	59,238.00
	1c. Copy line 63,	Total of all property	on Schedule A/B		\$_	222,268.00
Part	2: Summarize	Your Liabilities				
					You	r liabilities
					Amo	ount you owe
2.			nims Secured by Proper on A, Amount of claim, a	<i>ty</i> (Official Form 106D) It the bottom of the last page of Part 1 of <i>Schedule D</i>	o \$ _	200,395.00
3.			Insecured Claims (Offic (priority unsecured clai	ial Form 106E/F) ms) from line 6e of <i>Schedule E/F</i>	\$_	500.00
	3b. Copy the total	al claims from Part 2	(nonpriority unsecured	claims) from line 6j of Schedule E/F	\$_	35,800.00
				Your total liabilit	ios ¢	236,695.00
				Tour total nabilit	Ψ	230,093.00
Part	3: Summarize	Your Income and I	Expenses			
4.	Schedule I: Your	Income (Official For	m 106I)			
••		`	,	le I	\$ _	5,368.98
5.		Expenses (Official I ly expenses from lin	,		\$_	5,302.79
Part	4: Answer The	ese Questions for A	Administrative and Sta	ntistical Records		
6.	Are you filing fo	r bankruptcy unde	r Chapters 7, 11, or 13	?		
			•	Check this box and submit this form to the court with	your other	schedules.
	■ Yes					
7.	What kind of de	bt do you have?				
				r debts are those "incurred by an individual primarily -9g for statistical purposes. 28 U.S.C. § 159.	for a persor	nal, family, or

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

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the court with your other schedules.

Best Case Bankruptcy

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

8,097.77

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clain	m
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	500.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	500.00

Cill in	Abia inform	otion to identify w	and th	io filin	··			
FIII IN	tnis inform	ation to identify yo		iis tiiin	g:			
Debto	or 1	Paul H. Cerova		Name	Last Name			
Debto	or 2	Sheila A. Cerov		i Name	Lastivanie			
	e, if filing)	First Name		Name	Last Name			
Jnite	d States Ban	kruptcy Court for th	e: NORTHER	N DIST	RICT OF OHIO			
Case	number							☐ Check if this is a amended filing
		/=						
		m 106A/B						
SCI	nedule	A/B: Pro	perty					12/15
	lo. Go to Part 2	2.		,	lence, building, land, or similar property?			
1.1				Wha	t is the property? Check all that apply			
_	1607 Eastw Street address, if	ood Drive available, or other descrip	otion		Condominium or cooperative	the amount	of any secure	aims or exemptions. Put d claims on <i>Schedule D:</i> ms Secured by Property.
_	Brunswick		44212-0000 ZIP Code		Land	Current va		Current value of the portion you own? \$163,030.0
,	City	State	ZIP Code			-		our ownership interest
				□ Who	has an interest in the property? Check one	•	e), if known.	ancy by the entireties, o
,	Medina					Joint ten	anı	
_	County				Debtor 1 and Debtor 2 only			
	,						c if this is con structions)	nmunity property
				Othe	er information you wish to add about this iter erty identification number:	,	,	
					N: 003-18D-08-254, value per Medina	County A	uditor	
					your entries from Part 1, including any er here			\$163,030.00
art 2	Describe Y	our Vehicles						

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Debi		aul H. Cerova heila A. Cerov	,	C:	ase number (if known)	
3. C a	ars, vans,	trucks, tractor	rs, sport utility ve	hicles, motorcycles		
_	N			•		
_	No					
	Yes					
3.1	Make:	Dodge		Who has an interest in the property? Check one	the amount of any	ured claims or exemptions. Put secured claims on Schedule D:
	Model:	Journey		Debtor 1 only	Creditors Who Ha	ve Claims Secured by Property.
	Year:	2010	475000	Debtor 2 only	Current value of	
		nate mileage: formation:	175000	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	entire property?	portion you own?
		condition; value	e ner KBB	At least one of the deptors and another		
		party value	c per RBB	☐ Check if this is community property (see instructions)	\$3,138	3.00 \$3,138.00
3.2	Make:	Jeep		Who has an interest in the property? Check one		ured claims or exemptions. Put
	Model:	Cherokee	_	Debtor 1 only		secured claims on Schedule D: ve Claims Secured by Property.
	Year:	2017		Debtor 2 only	Current value of	the Current value of the
	Approxir	nate mileage:	53,000	■ Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other int	formation:		☐ At least one of the debtors and another		
	Good o	condition; valu	e per KBB	☐ Check if this is community property (see instructions)	\$15,282 	\$15,282.00
3.3	Make:	Dodge		Who has an interest in the property? Check one		ured claims or exemptions. Put
	Model:	Dart		Debtor 1 only		secured claims on Schedule D: ve Claims Secured by Property.
	Year:	2015		☐ Debtor 2 only	Current value of	the Current value of the
	Approxir	nate mileage:	100000	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other inf	formation:		At least one of the debtors and another		
	private co-sign child m mainte	condition; value party value - la nor for adult ch lakes all paym nance, and inst to vehicle.	Debtor is hild, adult hents for loan,	☐ Check if this is community property (see instructions)	\$6,968	\$6,968.00
Ex				d other recreational vehicles, other vehicles, ar tercraft, fishing vessels, snowmobiles, motorcycle a		
				n for all of your entries from Part 2, including a	•	\$25,388.00
Part	3: Descri	be Your Persona	l and Household Ite	ems		
				terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
		,		, china, kitchenware		

☐ Yes. Give specific information.....

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here

\$12,550.00

Debtor 2		•	Case number (if known	n)
Part 4:	Describe Your Fina	ncial Assots		
		legal or equitable interest i	n any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	nmples: Money you D	ı have in your wallet, in your h	nome, in a safe deposit box, and on hand when you file your pet	ition
			Cash	\$200.00
	institutions		counts; certificates of deposit; shares in credit unions, brokerage ts with the same institution, list each.	e houses, and other similar
	es		Institution name:	
		17.1. Checking	Huntington Account ending 8566	\$700.00
	amples: Bond fund	, or publicly traded stocks s, investment accounts with b	rokerage firms, money market accounts	
_	98	Institution or issue	r name:	
		NVent Stock (en	nployer)	\$400.00
join ■ No □ Ye 20. Gov	nt venture o es. Give specific in ernment and cor	nformation about them Name of entity: porate bonds and other neg	% of ownership:	
Nor ■ No	n-negotiable instru o		ashiers' checks, promissory notes, and money orders. ransfer to someone by signing or delivering them.	
	•		403(b), thrift savings accounts, or other pension or profit-sharin	g plans
■ Ye	es. List each accou	unt separately. Type of account:	Institution name:	
		401(k)	Employer provided 401(k)	\$20,000.00
You Exa ■ No	<i>amples:</i> Agreemen	sed deposits you have made s	so that you may continue service or use from a company , public utilities (electric, gas, water), telecommunications comp Institution name or individual:	anies, or others
		for a periodic payment of mor	ney to you, either for life or for a number of years)	
■ No		ssuer name and description.		
	ests in an educat	ion IRA, in an account in a	qualified ABLE program, or under a qualified state tuition p Schedule A/B: Property	rogram. page 4

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Debtor Debtor		•		Ca	ase number (if known)	
26 U	J.S.C. §§ 530(b)(1), 529	A(b), and 529(b)(1).			
■ N	-					
□ Ye	es Institu	ition name and de	scription. Separately file the rec	cords of any interes	ts.11 U.S.C. § 521(c):	
25. Tru s ■ N		interests in pro	perty (other than anything list	ed in line 1), and I	ights or powers exercis	able for your benefit
☐ Ye	es. Give specific inform	ation about them.				
	amples: Internet domain		rets, and other intellectual pr proceeds from royalties and lid		S	
· ·	es. Give specific inform	ation about them.				
	, 0,		tangibles es, cooperative association hold	dings, liquor license	s, professional licenses	
□ Ye	es. Give specific inform	ation about them.				
Money	or property owed to y	ou?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28. Tax	refunds owed to you					
□ N	-					
■ Ye	es. Give specific informa	ation about them,	including whether you already f	iled the returns and	the tax years	
		20	19 income tax refund, to the otherwise exempt	extent not	federal, state, local	Unknown
		p sum alimony, sp	oousal support, child support, m	aintenance, divorce	e settlement, property sett	tlement
□ Ye	es. Give specific informa	ation				
Exa	benefits; unpaid		e payments, disability benefits, to someone else	sick pay, vacation p	oay, workers' compensat	ion, Social Security
■ No	o es. Give specific inform	ation				
31. Inte <i>Exa</i>	rests in insurance pol amples: Health, disabilit	icies	r; health savings account (HSA)	; credit, homeowne	r's, or renter's insurance	
■ N	-	company of each	policy and list its value.			
ш.,	es. Name the msurance	Company name		Beneficiary	:	Surrender or refund value:
If you	ou are the beneficiary of meone has died.		om someone who has died lect proceeds from a life insurar	nce policy, or are cu	rrently entitled to receive	property because
■ No	o es. Give specific inform	ation				
Exa ■ No	amples: Accidents, emp	loyment disputes,	ot you have filed a lawsuit or insurance claims, or rights to si		r payment	
,	cc. Docombo caon cialli					

3/1 4	otor 1 Paul H. Cerovac, Jr. Sheila A. Cerovac		Case number (if known)	
	Other contingent and unliquidated claims of every nature, inclu	uding counterclaims	of the debtor and rights to se	t off claims
	■ No ☑ Yes. Describe each claim			
_	Tes. Describe each daim			
_	Any financial assets you did not already list			
	No			
_	Yes. Give specific information			
36.	Add the dollar value of all of your entries from Part 4, including for Part 4. Write that number here		es you have attached	\$21,300.00
Part	5: Describe Any Business-Related Property You Own or Have an Inte	rest In. List any real esta	ite in Part 1.	
37. C	Oo you own or have any legal or equitable interest in any business-relat	ed property?		
	No. Go to Part 6.			
	Yes. Go to line 38.			
Part	Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1.	I Own or Have an Interes	st In.	
1 6	Do you own or have any legal or equitable interest in any farm-	or commercial fishin	a-related property?	
	■ No. Go to Part 7.		ig related property.	
	☐ Yes. Go to line 47.			
Part	7: Describe All Property You Own or Have an Interest in That Yo	u Did Not List Above		
	• •			
53. I	Do you have other property of any kind you did not already list			
53. I	• •			
53. I	Do you have other property of any kind you did not already list Examples: Season tickets, country club membership			
53. I ■ □	Do you have other property of any kind you did not already list Examples: Season tickets, country club membership No Yes. Give specific information	?		
53. I ■ □	Do you have other property of any kind you did not already list Examples: Season tickets, country club membership	?		\$0.00
53. I ■ □ 54.	Do you have other property of any kind you did not already list Examples: Season tickets, country club membership No Yes. Give specific information Add the dollar value of all of your entries from Part 7. Write the	?		\$0.00
53. I □ 54.	Do you have other property of any kind you did not already list Examples: Season tickets, country club membership No Yes. Give specific information Add the dollar value of all of your entries from Part 7. Write the season tickets, country club membership No List the Totals of Each Part of this Form	? nat number here		V
53. I	Do you have other property of any kind you did not already list Examples: Season tickets, country club membership No Yes. Give specific information Add the dollar value of all of your entries from Part 7. Write the List the Totals of Each Part of this Form Part 1: Total real estate, line 2	? nat number here		\$0.00 \$163,030.00
54. Part 55. 56.	Do you have other property of any kind you did not already list Examples: Season tickets, country club membership No Yes. Give specific information Add the dollar value of all of your entries from Part 7. Write the B: List the Totals of Each Part of this Form Part 1: Total real estate, line 2	? mat number here \$25,388.00		V
54. Part 55. 56. 57.	Do you have other property of any kind you did not already list Examples: Season tickets, country club membership No Yes. Give specific information Add the dollar value of all of your entries from Part 7. Write the List the Totals of Each Part of this Form Part 1: Total real estate, line 2	\$25,388.00 \$12,550.00		V
53. I	Do you have other property of any kind you did not already list Examples: Season tickets, country club membership No Yes. Give specific information Add the dollar value of all of your entries from Part 7. Write the List the Totals of Each Part of this Form Part 1: Total real estate, line 2 Part 2: Total vehicles, line 5 Part 3: Total personal and household items, line 15 Part 4: Total financial assets, line 36	\$25,388.00 \$12,550.00 \$21,300.00		V 2 2 2 2
54. Part 55. 56. 57.	Do you have other property of any kind you did not already list Examples: Season tickets, country club membership No Yes. Give specific information Add the dollar value of all of your entries from Part 7. Write the List the Totals of Each Part of this Form Part 1: Total real estate, line 2	\$25,388.00 \$12,550.00 \$21,300.00 \$0.00		V
53. I 54. Part 55. 56. 57. 58. 59.	Do you have other property of any kind you did not already list Examples: Season tickets, country club membership No Yes. Give specific information Add the dollar value of all of your entries from Part 7. Write the List the Totals of Each Part of this Form Part 1: Total real estate, line 2	\$25,388.00 \$12,550.00 \$21,300.00		V 2 2 2 2
53. I	Do you have other property of any kind you did not already list Examples: Season tickets, country club membership No Yes. Give specific information Add the dollar value of all of your entries from Part 7. Write the List the Totals of Each Part of this Form Part 1: Total real estate, line 2	\$25,388.00 \$12,550.00 \$21,300.00 \$0.00		\$163,030.00
53. I Fart 54. 55. 56. 57. 58. 59. 60. 61.	Do you have other property of any kind you did not already list Examples: Season tickets, country club membership No Yes. Give specific information Add the dollar value of all of your entries from Part 7. Write the List the Totals of Each Part of this Form Part 1: Total real estate, line 2	\$25,388.00 \$12,550.00 \$21,300.00 \$0.00 \$0.00		\$163,030.00

GENERAL WARRANTY DEED

Sai Fang Lin, married to Ji-Qi Ang Zheng, who signs to release dower, ("Grantor") for valuable consideration paid, grant(s) with General Warranty Covenants to Paul H. Cerovac, Jr. and Sheila A. Cerovac, husband and wife, for their joint lives, remainder to the survivor of them, ("Grantee") whose tax mailing address is 1607 Eastwood Drive, Brunswick, Ohio 44212, the following real property:

Situated in the City of Brunswick, County of Medina, State of Ohio, and is described as follows: And being known as Sublot Number 28 in Golden Estates Subdivision Phase 1, being a part of Original Brunswick Township Lot No. 15, Tract 1, as shown by plat recorded in Plat Book 28, Page 4 of Medina County Plat Records, be the same more or less.

Property Address: 1607 Eastwood Drive, Brunswick, Ohio 44212

Permanent Parcel Number: 003-18D-08-254 Prior Instrument Reference: 2006OR005950

This conveyance and Grantor's covenants, are subject to conditions, covenants, restrictions, reservations, easements and leases of record; all legal highways; zoning and building ordinances; and real estate taxes and assessments, both general and special, for the current year and thereafter which Grantee assumes and agrees to pay, the same having been prorated to date of filing this deed for record.

To have and to hold the premises aforesaid, with the appurtenances thereunto belonging, to the said Grantee, its successors and/or assigns, so that neither the said grantor, nor his heirs, nor any other persons claiming title shall or will hereafter claim or demand any right or title to the premises, or any part thereof; but they and every one of them shall by these presents be excluded and forever barred.

Fill in this information to identify your case:								
Debtor 1	Paul H. Cerovac, J	r.						
	First Name	Middle Name	Last Name					
Debtor 2	Sheila A. Cerovac							
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF OHIO					
Case number								
(if known)						Check if this is an		
						amended filing		

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	ou own value from Check only one box for each exemption.		Specific laws that allow exemption
	Copy the value from Schedule A/B			
2010 Dodge Journey 175000 miles Good condition; value per KBB private	\$3,138.00		\$3,138.00	Ohio Rev. Code Ann. § 2329.66(A)(2)
party value Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	2020.00(1)(2)
Furniture, Appliances, pots, pans, other assorted household goods and	\$7,500.00		\$7,500.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
furniture; no one item over \$525.00 Line from <i>Schedule A/B</i> : 6.1			100% of fair market value, up to any applicable statutory limit	2020.00(1)(1)(a)
Precious Moments and baseball cards Line from Schedule A/B: 8.1	\$450.00		\$450.00	Ohio Rev. Code Ann. § 2329.66(A)(18)
Ellie Holli Genedale A.B. G. I			100% of fair market value, up to any applicable statutory limit	2323.00(1)(10)
12 gauge shotgun, Ruger 9mm pistol Line from Schedule A/B: 9.1	\$600.00		\$600.00	Ohio Rev. Code Ann. § 2329.66(A)(18)
Ellie Holli Genedale A.B. 3.1			100% of fair market value, up to any applicable statutory limit	2323.00(1)(10)
Clothing Line from Schedule A/B: 11.1	\$2,000.00		\$2,000.00	Ohio Rev. Code Ann. §
Line IIIII Scriedule A/B. 11.1			100% of fair market value, up to any applicable statutory limit	2329.66(A)(4)(a)

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

Best Case Bankruptcy

Debtor 1 Paul H. Cerovac, Jr. Debtor 2 Sheila A. Cerovac

Case number (if known)

Brief description of the property and line on Schedule A/B that lists this property	portion you own	Amount of the exemption you claim	Specific laws that allow exemptic
	Copy the value from Schedule A/B	Check only one box for each exemption.	
Wedding rings Line from <i>Schedule A/B</i> : 12.1	\$2,000.00	\$2,000.00	Ohio Rev. Code Ann. § - 2329.66(A)(4)(b)
and nom conedule /v B. 12.1		☐ 100% of fair market value, up to any applicable statutory limit	. , . , . ,
Cash Line from <i>Schedule A/B</i> : 16.1	\$200.00	\$200.00	Ohio Rev. Code Ann. § 2329.66(A)(3)
Line Holli Schedule A/B. 10.1		100% of fair market value, up to any applicable statutory limit	` ,` ,
Checking: Huntington Account ending 8566	\$700.00	\$700.00	Ohio Rev. Code Ann. § - 2329.66(A)(3)
Line from Schedule A/B: 17.1		☐ 100% of fair market value, up to any applicable statutory limit	` , ` ,
NVent Stock (employer) Line from Schedule A/B: 18.1	\$400.00	\$400.00	Ohio Rev. Code Ann. § - 2329.66(A)(18)
Line Holli Galledale A/D. 10.1		☐ 100% of fair market value, up to any applicable statutory limit	* * * *
401(k): Employer provided 401(k) Line from Schedule A/B: 21.1	\$20,000.00	\$20,000.00	11 U.S.C. § 522(b)(3)(C)
Line Holli Scriedule Avb. 21. I		100% of fair market value, up to any applicable statutory limit	
federal, state, local: 2019 income tax	Unknown		Ohio Rev. Code Ann. § 2329.66(A)(18)
refund, to the extent not otherwise exempt Line from <i>Schedule A/B</i> : 28.1		■ 100% of fair market value, up to any applicable statutory limit	
federal, state, local: 2019 income tax	Unknown		Ohio Rev. Code Ann. §
refund, to the extent not otherwise exempt Line from <i>Schedule A/B</i> : 28.1		100% of fair market value, up to any applicable statutory limit	2329.66(A)(9)(f)

■ No

☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

□ No

☐ Yes

Fill in this info	rmation to identify you	r case:			
Debtor 1	Paul H. Cerovac,	Jr.			
	First Name	Middle Name Last Name			
Debtor 2	Sheila A. Cerova	C Middle Name Last Name			
(Spouse if, filing)	riist Name	Middle Name Last Name			
United States B	ankruptcy Court for the:	NORTHERN DISTRICT OF OHIO			
Case number					
(if known)				☐ Check	if this is an
				ameno	led filing
Official For	m 106D				
Official For					
Schedule	D: Creditors	Who Have Claims Secure	ed by Propert	У	12/15
	he Additional Page, fill it o	f two married people are filing together, both are e out, number the entries, and attach it to this form.			
1. Do any creditor	s have claims secured by	your property?			
☐ No. Ched	ck this box and submit th	nis form to the court with your other schedules.	You have nothing else t	o report on this form.	
Yes. Fill	in all of the information b	pelow.			
Part 1: List	All Secured Claims				
2. List all secure	d claims. If a creditor has n	nore than one secured claim, list the creditor separate	Column A	Column B	Column C
for each claim. If	more than one creditor has	a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.		Value of collateral that supports this claim	Unsecured portion If any
2.1 Ally Final	ncial	Describe the property that secures the claim:	\$7,778.00	\$6,968.00	\$810.00
Creditor's Na	me	2015 Dodge Dart 100000 miles			
		Good condition; value per KBB private			
		party value - Debtor is co-signor for			
		adult child, adult child makes all			
		payments for loan, maintenance, and			
		insurance related to vehicle. As of the date you file, the claim is: Check all that			
P.o. Box		apply.			
Blooming	gton, MN 55438	☐ Contingent			
Number, Stre	et, City, State & Zip Code	☐ Unliquidated			
		☐ Disputed			
Who owes the c	lebt? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only		An agreement you made (such as mortgage or s car loan)	ecured		
■ Debtor 1 and [Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
_	the debtors and another	☐ Judgment lien from a lawsuit			
	claim relates to a	Other (including a right to offset)			
	Opened				

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

Last 4 digits of account number

page 1 of 3

04/15 Last Active

Date debt was incurred 7/24/19

7005

Debtor 1 Paul H. Ce			Case number (if known)				
First Name	Middle N	lame Last Name					
Debtor 2 Sheila A. C	erovac Middle N	lame Last Name					
Filst Name	Wildale N	dille Last Name					
2.2 Loancare Service	cing Ctr	Describe the property that secures the claim:	\$169,722.00	\$163,030.00	\$6,692.00		
Creditor's Name		1607 Eastwood Drive Brunswick, OH 44212 Medina County PPN: 003-18D-08-254, value per Medina County Auditor					
3637 Sentara W Virginia Beach,	,	As of the date you file, the claim is: Check all that apply. Contingent					
Number, Street, City, St	tate & Zip Code	Unliquidated					
Who owes the debt? Cl	heck one.	☐ Disputed Nature of lien. Check all that apply.					
■ Debtor 1 only □ Debtor 2 only		An agreement you made (such as mortgage or scar loan)	secured				
Debtor 1 and Debtor 2	only	☐ Statutory lien (such as tax lien, mechanic's lien)					
☐ At least one of the debt	tors and another	☐ Judgment lien from a lawsuit					
☐ Check if this claim recommunity debt	lates to a	Other (including a right to offset)					
Date debt was incurred	Opened 09/15 Last Active 8/30/19	Last 4 digits of account number 9221	1				
Date debt was incurred	0/30/19		<u>- </u>				
2.3 Regional Finance	ce Corp	Describe the property that secures the claim:	\$21,495.00	\$15,282.00	\$6,213.00		
Creditor's Name		2017 Jeep Cherokee 53,000 miles					
		Good condition; value per KBB					
2676 E Aurora I		As of the date you file, the claim is: Check all that apply.					
Twinsburg, OH		☐ Contingent					
Number, Street, City, St	tate & Zip Code	Unliquidated					
Who owes the debt? Cl	hook one	☐ Disputed Nature of lien. Check all that apply.					
_	neck one.	_					
☐ Debtor 1 only ☐ Debtor 2 only		An agreement you made (such as mortgage or s car loan)	securea				
Debtor 1 and Debtor 2	only	☐ Statutory lien (such as tax lien, mechanic's lien)					
At least one of the deb	tors and another	☐ Judgment lien from a lawsuit					
Check if this claim recommunity debt	lates to a	Other (including a right to offset)					
Date debt was incurred	Opened 04/17 Last Active 9/30/19	Last 4 digits of account number 8001	ľ				

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

page 2 of 3

Debtor 1 Paul H. Cerovac, Jr.				Case number (if known)				
	First Name N	liddle Name	Last Name					
Deb	tor 2 Sheila A. Cerovac							
	First Name N	liddle Name	Last Name					
	-							
2.4	Shaker Heights Fed. Cre			£4 400 00	CO 400 00	# 0.00		
2.7	Union	Describe	e the property that secures the claim:	\$1,400.00	\$3,138.00	\$0.00		
	Creditor's Name	2010 🗅	odge Journey 175000 miles					
		Good o	condition; value per KBB private					
		party v	alue					
	3450 Lee Road, Room 2		e date you file, the claim is: Check all that	_				
	Shaker Heights, OH 441:	app.y.						
		= 001111						
	Number, Street, City, State & Zip Coo							
		☐ Dispu						
Who	o owes the debt? Check one.	Nature (of lien. Check all that apply.					
	Debtor 1 only	An ac	greement you made (such as mortgage or	secured				
	Debtor 2 only	carl	oan)					
	Debtor 1 and Debtor 2 only	☐ Statu	tory lien (such as tax lien, mechanic's lien)				
	At least one of the debtors and and	other 🗖 Judgi	ment lien from a lawsuit					
	Check if this claim relates to a	☐ Other	r (including a right to offset)					
	community debt		· · · · · · · · · · · · · · · · · · ·					
Date	e debt was incurred	L	ast 4 digits of account number					
Ac	ld the dollar value of your entrie	es in Column A c	on this page. Write that number here:	\$200,395.00	л			
	this is the last page of your form		. •	· ·	-			
	rite that number here:	,	and the same of th	\$200,395.00	/			

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

page 3 of 3

Fill in this infor	mation to identify your	case:					
Debtor 1	Paul H. Cerovac, J	r					
202101 1	First Name	Middle Name	Last Name				
Debtor 2	Sheila A. Cerovac						
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Ba	ankruptcy Court for the:	NORTHERN DISTRIC	T OF OHIO				
Case number							
(if known)						Check if this is a	n
						amended filing	
Official For	m 106E/E						
Official Form	<u>⊞ 106⊑/⊏</u> E/F: Creditors W	ha Haya Uncas	urad Claima			12/1	E
				0.6	NIDDIODITY		
	nd accurate as possible. Us ntracts or unexpired leases						
	utory Contracts and Unexp						
	itors Who Have Claims Sec						
	ntinuation Page to this pag						
name and case nu	ımber (if known).						
Part 1: List A	All of Your PRIORITY Un	secured Claims					
1. Do any credit	tors have priority unsecure	d claims against you?					
☐ No. Go to	Part 2.						
Yes.							
	ur priority unsecured claims	If a creditor has more than	one priority unsecured clair	m list the creditor const	atoly for each cla	nim. For each claim	listed
	ype of claim it is. If a claim ha						
	he claims in alphabetical orde						
	than one creditor holds a pa			, , , , , , , , , , , , , , , , , , , ,	,		,
(For an explar	nation of each type of claim, s	ee the instructions for this fo	rm in the instruction bookle	t.)			
	•			Total claim	Priority	Nonprior	ity
Oity of	Dwwariak	l and A dimite	.f	фгоо <i>с</i>	amount	amount	<u></u>
	Brunswick reditor's Name	Last 4 digits o	of account number	\$500.0	<u> </u>	600.00	\$0.00
•	enter Road	When was the	debt incurred? 01/1	5/209			
	rick, OH 44212		<u> </u>	0,200			
	Street City State Zip Code	As of the date	you file, the claim is: Che	eck all that apply			
	ed the debt? Check one.	☐ Contingent	•	in an anat apply			
Debtor 1		_					
Debtor 2	•	☐ Unliquidate —	d				
_	•	☐ Disputed					
Debtor 1	and Debtor 2 only		RITY unsecured claim:				
☐ At least o	one of the debtors and anothe	Domestic s	upport obligations				
☐ Check if	this claim is for a commun	nity debt Taxes and	certain other debts you owe	the government			
Is the claim	subject to offset?	☐ Claims for o	death or personal injury whi	le you were intoxicated			
■ No	-	Other. Spec	oifu.				
☐ Yes		□ Other. Oper	Income taxes				
Part 2: List A	All of Your NONPRIORIT	Y Unsecured Claims					
3. Do any credit	tors have nonpriority unsec	ured claims against you?					
☐ No. You ha	ave nothing to report in this p	art. Submit this form to the co	ourt with your other schedul	es.			
	•						
Yes.							
Yes. 4. List all of you	ur nonpriority unsecured cla						

Total claim

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 11

Debtor Debtor	Paul H. Cerovac, Jr. Sheila A. Cerovac		Case number (if known)	
4.1	Amsher Collection Serv	Last 4 digits of account number	2768	\$407.00
	Nonpriority Creditor's Name 4524 Southlake Parkway Hoover, AL 35244	When was the debt incurred?	Opened 07/19	
-	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Collection A	ttorney Directv	
4.2	Avant Nonpriority Creditor's Name	Last 4 digits of account number	4897	\$0.00
	222 N. Lasalle St Chicago, IL 60601	When was the debt incurred?	Opened 05/15 Last Active 4/08/16	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Unsecured		
4.3	Cach Llc/resurgent Cap Nonpriority Creditor's Name	Last 4 digits of account number	4897	\$10,110.00
	C/o Resurgent Capital Services Greenville, SC 29602	When was the debt incurred?	Opened 10/16	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Factoring C	ompany Account Webbank	

Schedule E/F: Creditors Who Have Unsecured Claims

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	1 Paul H. Cerovac, Jr.2 Sheila A. Cerovac		Case number (if known)	
4.4	Capital One Bank Usa N	Last 4 digits of account number	5538	\$0.00
	Nonpriority Creditor's Name Po Box 30281 Salt Lake City, UT 84130	When was the debt incurred?	Opened 09/19 Last Active 10/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Credit Card		
4.5	Central Loan Admin & R Nonpriority Creditor's Name	Last 4 digits of account number	1361	\$0.00
	Po Box 77404 Ewing, NJ 08628	When was the debt incurred?	Opened 09/14 Last Active 9/23/15	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	■ Other. Specify FHA Real E	state Mortgage	
4.6	Central Loan Admin & R Nonpriority Creditor's Name	Last 4 digits of account number	9959	\$0.00
	Po Box 77404 Ewing, NJ 08628	When was the debt incurred?	Opened 9/22/15 Last Active 6/27/16	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify FHA Real E	state Mortgage	
		. ,		

Schedule E/F: Creditors Who Have Unsecured Claims

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Debtor 1 Debtor 2	Paul H. Cerovac, Jr. Sheila A. Cerovac		Case number (if known)	
	Enhanced Recovery Co L Nonpriority Creditor's Name	Last 4 digits of account number	7179	\$254.00
8	3014 Bayberry Rd Jacksonville, FL 32256	When was the debt incurred?	Opened 11/15	
1	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
[Debtor 1 only	☐ Contingent		
ı	Debtor 2 only	☐ Unliquidated		
[Debtor 1 and Debtor 2 only	☐ Disputed		
[At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	lebt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
I	No	Debts to pension or profit-sharing	g plans, and other similar debts	
[☐ Yes	■ Other. Specify Collection A	attorney Time Warner Cable	
	First Premier Bank	Last 4 digits of account number	8102	\$478.00
6	601 S Minnesota Ave Sioux Falls, SD 57104	When was the debt incurred?	Opened 11/10 Last Active 7/14/11	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
_	Who incurred the debt? Check one.	_		
_	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	s the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
I	No	Debts to pension or profit-sharing	ng plans, and other similar debts	
[□Yes	■ Other. Specify Credit Card		
	Frontier Communication Nonpriority Creditor's Name	Last 4 digits of account number	1145	\$419.00
1	19 John St Middletown, NY 10940	When was the debt incurred?	Opened 10/14 Last Active 7/14/16	
1	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
I	Debtor 1 only	☐ Contingent		
[Debtor 2 only	☐ Unliquidated		
[Debtor 1 and Debtor 2 only	☐ Disputed		
[☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
[☐ Check if this claim is for a community	☐ Student loans		
c	debt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
I	No	Debts to pension or profit-sharing	g plans, and other similar debts	
[☐Yes	■ Other. Specify Agriculture		

Schedule E/F: Creditors Who Have Unsecured Claims

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Best Case Bankruptcy

btor 1 Paul H. Cerovac, Jr. Sheila A. Cerovac		Case number (if known)	
Gm Financial	Last 4 digits of account number	8545	\$0.00
Nonpriority Creditor's Name Po Box 181145	When was the debt incurred?	Opened 11/10 Last Active 5/06/13	
Arlington, TX 76096 Number Street City State Zip Code	As of the date you file, the claim	is: Chack all that apply	
Who incurred the debt? Check one.	As of the date you file, the claim	15. Спеск ан так арргу	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Automobile		
I C System Inc	Last 4 digits of account number	6001	\$175.00
Nonpriority Creditor's Name			·
Po Box 64378 Saint Paul, MN 55164	When was the debt incurred?	Opened 08/15	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	•	,	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	□ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Collection A	Attorney Medina Centerpointe Chiro	
I.c. System, Inc	Last 4 digits of account number	6001	\$175.00
Nonpriority Creditor's Name Po Box 64378	When was the debt incurred?	Opened 08/15	
Saint Paul, MN 55164 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	Пол		
	Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
At least one of the debtors and another	Student loans	u ciaiill.	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
No	report as priority claims Debts to pension or profit-sharir	ng plans, and other similar debts	
	Collection A	Attorney Medina Centerpointe Chiro	
☐ Yes	Other. Specify Inc		

Schedule E/F: Creditors Who Have Unsecured Claims

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ebtor 2 Sheila A. Cerovac		Case number (if known)				
Jared-galleria Of Jwlr	Last 4 digits of account number	7681	\$2,587.0			
Nonpriority Creditor's Name 375 Ghent Rd Fairlawn, OH 44333	When was the debt incurred?	Opened 09/11 Last Active 10/10/16				
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim					
■ Debtor 1 only	☐ Contingent					
Debtor 2 only	☐ Unliquidated					
Debtor 1 and Debtor 2 only	☐ Disputed					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
☐ Check if this claim is for a community	☐ Student loans					
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts				
Yes	Other. Specify Charge Acc	count				
Jefferson Capital Syst	Last 4 digits of account number	4003	\$519.0			
Nonpriority Creditor's Name 16 Mcleland Rd	When was the debt incurred?	Opened 12/15				
Saint Cloud, MN 56303 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply				
Who incurred the debt? Check one.	As of the date you me, the claim	5. Officer all that apply				
☐ Debtor 1 only	☐ Contingent					
■ Debtor 2 only	☐ Unliquidated					
☐ Debtor 1 and Debtor 2 only	☐ Disputed					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
☐ Check if this claim is for a community	☐ Student loans					
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
No	Debts to pension or profit-sharing					
Yes	■ Other. Specify Factoring C	ompany Account Verizon Wireless				
Jefferson Capital Syst	Last 4 digits of account number	0003	\$2,750.0			
Nonpriority Creditor's Name 16 Mcleland Rd	When was the debt incurred?	Opened 04/18	Ψ_,: σσ.σ			
Saint Cloud, MN 56303						
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Спеск ан that арріу				
Debtor 1 only	☐ Contingent					
Debtor 2 only	☐ Unliquidated					
Debtor 1 and Debtor 2 only	☐ Disputed					
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
☐ Check if this claim is for a community debt		aration agreement or divorce that you did not				
Is the claim subject to offset?	report as priority claims	report as priority claims Debts to pension or profit-sharing plans, and other similar debts				
■ No						
☐ Yes	Other Specify Factoring C	oring Company Account Verizon Wireless				

Schedule E/F: Creditors Who Have Unsecured Claims

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2 Sheila A. Cerovac		Case number (if known)			
Prfrd Cus Ac	Last 4 digits of account number	3041	\$600.00		
Nonpriority Creditor's Name		Opened 10/14 Last Active			
Po Box 94498 Las Vegas, NV 89193	When was the debt incurred? 3/10/17				
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim				
Debtor 1 only	☐ Contingent				
☐ Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
Yes	■ Other. Specify Charge Acc	ount			
Resurgent	Last 4 digits of account number	7681	\$2,634.00		
Nonpriority Creditor's Name Care Of Resurgent Capital Serv Greenville, SC 29602	When was the debt incurred?	Opened 6/04/18			
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
■ Debtor 1 only	☐ Contingent				
☐ Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
Yes	■ Other. Specify _01 Sterling .				
Revenue Group	Last 4 digits of account number	7656	\$1,000.00		
Nonpriority Creditor's Name	Last 4 digits of account number		ψ1,000.0		
3700 Park East Drive Beachwood, OH 44122	When was the debt incurred?	Opened 07/19			
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
☐ Debtor 1 only	☐ Contingent				
■ Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims				
■ No	Debts to pension or profit-sharing plans, and other similar debts				
☐ Yes	Collection A Other. Specify Speciali	attorney Northcoast Endodontic			

Schedule E/F: Creditors Who Have Unsecured Claims

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Syncb/care Credit Nonpriority Creditor's Name C/o Po Box 965036 Orlando, Fl. 32896 Number Street City State 2ip Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 and Debtor 2 only I sthe claim subject to offset? Noppriority Creditor's Name Syze Clock Pointer Trail Stow, OH 44224 Number Street City State 2ip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 2 only Nonpriority Creditors Name 3928 Clock Pointer Trail Stow, OH 44224 Number Street City State 2ip Code Who Incurred the debt? Check one. Debtor 3 only Debtor 4 only Debtor 4 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 6 only Debtor 7 only Debtor 8 only Debtor 8 only Debtor 9 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 onesion or profit-sharing plans, and other similar debts Debtor 8 onesion or profit-sharing plans, and other similar debts Debtor 8 onesion or profit-sharing plans, and other similar debts Debtor 8 onesion or profit-sharing plans, and other similar debts Debtor 8 onesion or profit-sharing plans, and other similar debts Debtor 8 onesion or profit-sharing plans, and other similar debts Debtor 8 onesion or profit-sharing plans,					
C/o Po Box 965036 Orlando, FL 32896 Orlando, FL 32896 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 8 only Debtor 8 only Debtor 9 only Debtor 1 only	\$8,687.0				
Number Street City State Zip Code As of the date you file, the claim is: Check all that apply					
Debtor 2 only					
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Team Recovry Nonpriority Creditor's Name 3928 Clock Pointe Trail Stow Lest on the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Team Recovry Nonpriority Creditor's Name No Debtor 1 and Debtor 2 only Debtor 1 only Stow OH 44224 Number Street City State Zip Code Who incurred the debt? No Debtor 1 only Stow OH 44224 Number Street City State Zip Code Who incurred the debtors and another Check if this claim is for a community debt Stow OH 44224 Number Street City State Zip Code Who incurred the debtors and another Check if this claim is for a community debt Student loans Team Recovry Noppriority Creditor's Name Says Clock Pointe Trail Stow OH 44224 Number Street City State Zip Code Who incurred the debtors and another Check if this claim is for a community debt Student loans Team Recovry Noppriority Creditor's Name Says Clock Pointe Trail Stow OH 44224 Number Street City State Zip Code Who incurred the debtor Check one. Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 4 only Debtor 4 only Debtor 5 only Debtor 6 NOPRIORITY unsecured claim: Debtor 6 NOPRIORITY unsecured claim:					
At least one of the debtors and another Check if this claim is for a community debt Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Other. Specify Charge Account Team Recovry Charge Account Other. Specify Charge Account					
Check if this claim is for a community debt Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Other. Specify Charge Account Team Recovry					
Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing					
Is the claim subject to offset? No					
Team Recovry Nonpriority Creditor's Name 3928 Clock Pointe Trail Stow, OH 44224 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debtor 1 sonly Contingent Disputed Type of NONPRIORITY unsecured claim: Check if this claim as for a community debt Is the claim subject to offset? No Debtor 2 only Debtor 3 only Contingent Debtor 4 debt 0 offset 2 only Disputed Type of NONPRIORITY unsecured claim: Check if this claim is for a community debt Is the claim subject to offset? Other. Specify Medical Team Recovry Nonpriority Creditor's Name 3928 Clock Pointe Trail Stow, OH 44224 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Disputed Team Recovry Contingent Unliquidated Disputed					
Team Recovry Nonpriority Creditor's Name 3928 Clock Pointe Trail Stow, OH 44224 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Team Recovry Nonpriority Creditor's Name 3928 Clock Pointe Trail Stow, OH 44224 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims Other. Specify Medical Team Recovry Nonpriority Creditor's Name 3928 Clock Pointe Trail Stow, OH 44224 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Disputed Topend 8/17/18 As of the date you file, the claim is: Check all that apply					
Nonpriority Creditor's Name 3928 Clock Pointe Trail Stow, OH 44224 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Team Recovry Nonpriority Creditor's Name 3928 Clock Pointe Trail Stow, OH 44224 Number Street City State Zip Code When was the debt incurred? Opened 8/17/18 As of the date you file, the claim is: Check all that apply When was the debt incurred? Opened 8/17/18 As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Disputed When was the debt incurred? Opened 8/17/18 As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Disputed					
Nonpriority Creditor's Name 3928 Clock Pointe Trail Stow, OH 44224 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Team Recovry Nonpriority Creditor's Name 3928 Clock Pointe Trail Stow, OH 44224 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only When was the debt incurred? Opened 8/17/18 As of the date you file, the claim is: Check all that apply When was the debt incurred? Opened 8/17/18 As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Disputed	\$182.0				
Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debtor 2 only Debtor 2 only Medical Team Recovry Nonpriority Creditor's Name 3928 Clock Pointe Trail Stow, OH 44224 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Contingent Contingent Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 1 only Medical As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply Contingent Debtor 1 only Debtor 2 only Disputed					
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 6 nonpriority Creditor's Name Syap 8 Clock Pointe Trail Stow, OH 44224 Number Street City State Zip Code Who incurred the debt 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 only Debtor 2 only Disputed Contingent Uniliquidated Debtor 1 only Debtor 1 and Debtor 2 only Disputed					
□ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debtor 1 only □ Contingent □ Contingent □ Debtor 1 and Debtor 2 only □ Disputed □ DisputeDisputeDisputeDisputeDisputeDisputeDisputeDisputeDisputeDisputeDisputeDisputeDisput					
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Nonpriority Creditor's Name 3928 Clock Pointe Trail Stow, OH 44224 Number Street City State Zip Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Other. Specify Medical When was the debt incurred? ○ Opened 8/17/18 As of the date you file, the claim is: Check all that apply □ Contingent □ Debtor 1 and Debtor 2 only □ Disputed					
□ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt □ Student loans □ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts □ Yes ■ Other. Specify Medical Team Recovry Nonpriority Creditor's Name 3928 Clock Pointe Trail Stow, OH 44224 Number Street City State Zip Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Disputed □ Dispute					
☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim: ☐ Check if this claim is for a community debt ☐ Student loans ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ☐ Other. Specify Medical Team Recovry Nonpriority Creditor's Name 3928 Clock Pointe Trail Stow, OH 44224 Number Street City State Zip Code Who incurred the debt? Check one. ☐ Debtor 1 only ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Disputed ☐ Dispute Disputed ☐ Disputed ☐ Dispute Disputed ☐ Dispute Dispute Disputed ☐ Dispute Dispute D					
☐ Check if this claim is for a community debt ☐ Student loans ☐ Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ☐ Other. Specify Medical Team Recovry Nonpriority Creditor's Name 3928 Clock Pointe Trail Stow, OH 44224 Number Street City State Zip Code Who incurred the debt? Check one. ☐ Debtor 1 only ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Disputed Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts of a separation agreement or divorce that you did not report as priority claims ☐ Debts of a separation agreement or divorce that you did not report as priority claims ☐ Debts of a separation agreement or divorce that you did not report as priority claims ☐ Debts of a separation agreement or divorce that you did not report as priority claims ☐ Debts of a separation agreement or divorce that you did not report as priority claims ☐ Debts of a separation agreement or divorce that you did not report as priority claims ☐ Debts of a separation agreement or divorce that you did not report as priority claims ☐ Debts of a separation agreement or divorce that you did not report as priority claims ☐ Debts of a separation agreement or divorce that you did not report as priority claims ☐ Debts of a separation agreement or divorce that you did not report as priority claims ☐ Debts of a separation agreement or divorce that you did not report as priority claims ☐ Debts of a separation agreement or divorce that you did not report as priority claims ☐ Debts					
debt Is the claim subject to offset? In No In Debts to pension or profit-sharing plans, and other similar debts In No In Debts to pension or profit-sharing plans, and other similar debts In Other. Specify In Medical Team Recovry In Nonpriority Creditor's Name 3928 Clock Pointe Trail Stow, OH 44224 In Number Street City State Zip Code Who incurred the debt? Check one. In Debtor 1 only In Debtor 2 only In Debtor 3 only In Debtor 3 only In Debtor 4 only In Debtor 4 only In Debtor 4 only In Debtor 5 only In Debtor 5 only In Debtor 6 offset? In Obligations arising out of a separation agreement or divorce that you did not report as priority claims In Obligations arising out of a separation agreement or divorce that you did not report as priority claims In Debts 6 offset 2 only Indiquidated In Debts 7 only In Debts 7 o					
Team Recovry Nonpriority Creditor's Name 3928 Clock Pointe Trail Stow, OH 44224 Number Street City State Zip Code Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Medical Medical Medical 7066 When was the debt incurred? Opened 8/17/18					
Team Recovry Nonpriority Creditor's Name 3928 Clock Pointe Trail Stow, OH 44224 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Last 4 digits of account number 7066 When was the debt incurred? Opened 8/17/18 As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed					
Nonpriority Creditor's Name 3928 Clock Pointe Trail Stow, OH 44224 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Disputed When was the debt incurred? Opened 8/17/18 When was the debt incurred? Opened 8/17/18 Contingent Unliquidated Disputed					
Nonpriority Creditor's Name 3928 Clock Pointe Trail Stow, OH 44224 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only When was the debt incurred? Opened 8/17/18 As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed	\$57.0				
Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed					
□ Debtor 1 only □ Contingent □ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed					
■ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed					
□ Debtor 1 and Debtor 2 only □ Disputed					
☐ At least one of the debtors and another I ype of NONPRIORITY unsecured claim:					
Charles the same					
☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not					
Is the claim subject to offset? report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts	□ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Medical				

Schedule E/F: Creditors Who Have Unsecured Claims

Page 8 of 11

	or 1 Paul H. Cerovac, Jr. Sheila A. Cerovac		Case number (if known)			
4.2 2	Team Recovry	Last 4 digits of account number	7067	\$57.00		
	Nonpriority Creditor's Name 3928 Clock Pointe Trail	When was the debt incurred?	Opened 8/17/18			
	Stow, OH 44224 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	Debtor 1 only	☐ Contingent				
	■ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	■ Other. Specify Medical				
4.2 3	Verizon Wireless	Last 4 digits of account number	0001	\$2,750.00		
	Nonpriority Creditor's Name		Opened 06/13 Last Active			
	Po Box 49 Lakeland, FL 33802	When was the debt incurred?	10/31/15			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify				
4.2 4	Webbank/fingerhut Nonpriority Creditor's Name	Last 4 digits of account number	5289	\$356.00		
	6250 Ridgewood Road Saint Cloud, MN 56303	When was the debt incurred?	Opened 08/19 Last Active 8/04/19			
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply			
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims				
	No	Debts to pension or profit-sharin	g plans, and other similar debts			
	☐ Yes	·				
	□ Yes	Other. Specify Charge Acc				

Schedule E/F: Creditors Who Have Unsecured Claims

Page 9 of 11

	Paul H. Ce Sheila A. (Case nur	mber (if kno	own)	
ı • ı	Vebbank/fin	-	Last 4 digits of account number	6078			\$279.00
62	250 Ridgev aint Cloud,	vood Road	When was the debt incurred?	Opene 12/14/		Last Active	
N	umber Street (City State Zip Code the debt? Check one.	As of the date you file, the claim	is: Check	all that appl	ly	
	Debtor 1 only	у	☐ Contingent				
	Debtor 2 only	у	☐ Unliquidated				
	Debtor 1 and	d Debtor 2 only	☐ Disputed				
	At least one	of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
		s claim is for a community	Student loans				
	ebt the claim sul	bject to offset?	Obligations arising out of a separeport as priority claims	aration agre	eement or o	divorce that you did not	
_	No	bject to onset:	Debts to pension or profit-sharir	ng plans, a	nd other sir	milar dehts	
	■ No] Yes				ria outor sir	Tillal debis	
	」Yes		Other. Specify Charge Acc	ount			
1 U	Vf/preferr		Last 4 digits of account number	3041			\$1,324.00
Р	onpriority Cred o Box 1451	17	When was the debt incurred?	Opene 3/10/1		Last Active	
	es Moines,						
		City State Zip Code the debt? Check one.	As of the date you file, the claim	is: Check	all that appl	ly	
_	Debtor 1 only		Пол				
	_	•	☐ Contingent				
	Debtor 2 only	•	☐ Unliquidated				
		d Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim.			
		of the debtors and another	Student loans	u olulli.			
	⊒ Cneck if thi: ebt	s claim is for a community	☐ Obligations arising out of a sepa	aration agre	eement or o	divorce that you did not	
Is	the claim sul	bject to offset?	report as priority claims	aradiorr agri	oomon or c	arvorco mat you did not	
	No		Debts to pension or profit-sharing	ng plans, a	nd other sir	milar debts	
	Yes		■ Other. Specify Charge Acc	count			
			· ,				•
Part 3:	List Others	s to Be Notified About a Debt 1	Γhat You Already Listed				
is trying have mo	to collect from	m you for a debt you owe to some	ut your bankruptcy, for a debt that yone else, list the original creditor in ou listed in Parts 1 or 2, list the add ubmit this page.	n Parts 1 o	r 2, then li	st the collection agency	here. Similarly, if you
Part 4:	Add the Ar	mounts for Each Type of Unse	cured Claim				
	e amounts of o		. This information is for statistical r	eporting p	ourposes o	only. 28 U.S.C. §159. Add	d the amounts for each
						Total Claim	
Total	6a.	Domestic support obligations		6a.	\$	0.00	-
claims							
from Part	1 6b. 6c.	Taxes and certain other debts yo Claims for death or personal inju	=	6b. 6c.	\$ 	500.00	-
	6d.	· · · · · · · · · · · · · · · · · · ·	red claims. Write that amount here.	6d.	\$	0.00	-
		. ,				0.00	-
	6e.	Total Priority. Add lines 6a throug	h 6d.	6e.	\$	500.00	-
						Total Claim	
Total claims	6f.	Student loans		6f.	\$	0.00	-

Schedule E/F: Creditors Who Have Unsecured Claims

Page 10 of 11

Debtor 1 Paul H. Cerovac, Jr. Debtor 2 Sheila A. Cerovac

Case number (if known)

0110	ona 7 t.	OCIOVAO		
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 35,800.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 35,800.00

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 11 of 11

Fill in this infor	rmation to identify your	case:		
Debtor 1	Paul H. Cerovac,	Ir. Middle Name	Last Name	
Debtor 2	Sheila A. Cerovac		Lastivallie	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO	
Case number				
(if known)				☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1 Chrysler Capital Po Box 961212 Fort Worth, TX 76161	Acct# 30000113134001000 Opened Opened 03/15 Last Active 9/27/17 2017 Jeep Cherokee 53,000 miles Good condition; value per KBB

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Page 1 of 1

Fill in thi	s information to identify your	case:		
Debtor 1	Paul H. Cerovac,	Jr. Middle Name	Last Name	
Debtor 2	Sheila A. Cerovac			
(Spouse if, fi	ling) First Name	Middle Name	Last Name	
United St	ates Bankruptcy Court for the:	NORTHERN DISTRIC	T OF OHIO	
Case nun	nber			☐ Check if this is an amended filing
Scheo		re also liable for any de		12/15 s complete and accurate as possible. If two married
fill it out,		boxes on the left. Attac	h the Additional Page to	ion. If more space is needed, copy the Additional Page, o this page. On the top of any Additional Pages, write
1. Do	you have any codebtors? (If	you are filing a joint case,	do not list either spouse	as a codebtor.
■ No				
Arizo	thin the last 8 years, have you na, California, Idaho, Louisiana b. Go to line 3. es. Did your spouse, former spo	, Nevada, New Mexico, P	uerto Rico, Texas, Washi	y? (Community property states and territories include ington, and Wisconsin.)
in lin Form	e 2 again as a codebtor only	if that person is a guara	ntor or cosigner. Make s	if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Officia 16G). Use Schedule D, Schedule E/F, or Schedule G to f
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.1	Name			☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line ☐ Schedule G, line
	Number Street City	State	ZIP Code	
3.2	Name			☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line ☐ Schedule G, line
	Number Street City	State	ZIP Code	_

Schedule H: Your Codebtors

Fill	in this information to identify your c	ase:								
Del	btor 1 Paul H. Cerc	vac, Jr.								
	btor 2 Sheila A. Ce	rovac			_					
Uni	ited States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF OHIO		_					
Case number (If known)			-		☐ An amer ☐ A supple	Check if this is: ☐ An amended filing ☐ A supplement showing postpetition chapter 13 income as of the following date:				
0	fficial Form 106I					MM / DD	/ YYYY			
S	chedule I: Your Inc	ome						12/1		
sup spo atta	as complete and accurate as pos- plying correct information. If you use. If you are separated and you ch a separate sheet to this form. The describe Employment	are married and not fili	ng jointly, and your sith you, do not include	spouse i de inforn	s liv natio	ing with you, ir on about your s	clude infor	mation about your nore space is needed,		
1.	Fill in your employment information. Debtor 1		Debtor 2 or non-filing spouse							
	If you have more than one job, attach a separate page with information about additional employers.	Employment status	■ Employed			■ Em	ployed			
		Linployment status	☐ Not employed			□ No	☐ Not employed			
		Occupation	Tool & Die Make	r		Home	maker			
	Include part-time, seasonal, or self-employed work.	Employer's name	N Vent	N Vent						
	Occupation may include student or homemaker, if it applies.									
		How long employed t	here? 12 years	S						
Pai	rt 2: Give Details About Mor	nthly Income								
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to re	eport for a	any I	line, write \$0 in t	he space. In	clude your non-filing		
	ou or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	n for all e	mplo	oyers for that pe	rson on the I	ines below. If you need		
						For Debtor 1		ebtor 2 or ling spouse		
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	6,180.4	2 \$	0.00		
2	Estimate and list monthly overt	ime nav		2	т¢	1 /17 2	- .¢	0.00		

Official Form 106I Schedule I: Your Income page 1

7,597.77

\$

0.00

Calculate gross Income. Add line 2 + line 3.

Case number (if known)

					For Debtor 1		or Debtor on-filing s		
	Copy	y line 4 here	4.	-	\$ 7,597.77	\$	on ming c	0.0	
5.	List a	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.		\$ 1,752.96	\$		0.0	0
	5b.	Mandatory contributions for retirement plans	5b.		\$ 0.00	\$		0.0	
	5c.	Voluntary contributions for retirement plans	5c.		\$ 0.00	\$		0.0	
	5d.	Required repayments of retirement fund loans	5d.		\$ 72.28	\$		0.0	
	5e.	Insurance	5e.		\$ 853.54	\$		0.0	
	5f.	Domestic support obligations	5f.		\$ 0.00	\$		0.0	
	5g.	Union dues	5g.		\$ 0.00	\$		0.0	
	5h.	Other deductions. Specify: Nicotine Premium	5h.		\$ 50.01	+ \$		0.0	
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	— 6.		\$ 2,728.79	\$		0.0	
7.		ulate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$ 4,868.98	\$		0.0	
8.	8a.	All other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.		\$	\$		0.0	0
	8b.	Interest and dividends	8b.		\$0.00	\$		0.0	0
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.		\$0.00	\$		0.0	
	8d.	Unemployment compensation	8d.	:	\$0.00	\$		0.0	0_
	8e.	Social Security	8e.	:	\$ 0.00	\$		0.0	0
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.	;	\$0.00	\$		0.0	0_
	8g.	Pension or retirement income	8g.	:	\$ 0.00	\$		0.0	0
	8h.	Other monthly income. Specify: Babysitting	_ 8h.	+ :	\$	+ \$		500.0	0
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$		500.	00
10.		ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$	4,868.98 + \$		500.00	= \$	5,368.98
11.	11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00								0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certa es						\$	5,368.98
13.	_	ou expect an increase or decrease within the year after you file this form	?				·	Comb	oined hly income
		No. Yes. Explain: Overtime has been eliminated going forward.							

Official Form 106l Schedule I: Your Income page 2

						_			
Fill in thi	is informat	tion to identify yo	our case:						
Debtor 1		Paul H. Cerov	vac, Jr.			Cr		f this is: amended filing	
Debtor 2 (Spouse,	if filing)	Sheila A. Cer	ovac				A s	supplement show	ving postpetition chapter the following date:
United St	tates Bankr	uptcy Court for the	: NORTH	ERN DISTRICT OF OHIC)		M	M / DD / YYYY	
Case nun									
Offic	ial Fo	rm 106J							
Sche	edule	J: Your l	Exper	ISAS					12/1
Be as co	omplete a	and accurate as	possible.	. If two married people ar ch another sheet to this					r supplying correct
Part 1:		ibe Your House	hold						
_	this a join								
_	No. Go to		in a conar	ate household?					
_			iii a sepai	ate nousenoid?					
	■ No	_	st file Offici	al Form 106J-2, <i>Expenses</i>	s for Separate House	ehold of D	ebtor	2.	
2. Do	you have	e dependents?	□ No						
Do	-	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relati			Dependent's age	Does dependent live with you?
	not state				Son			15	□ No ■ Yes
dop	portacrito	names.							□ No
					Daughter			19	■ Yes
					Son			21	□ No ■ Yes
									■ Yes □ No
					Son			23	■ Yes
exp	penses of	enses include people other to your depende	han $_{m \Box}$	No Yes					
expense	e your ex		our bankrı	y Expenses uptcy filing date unless y y is filed. If this is a supp					
the valu		n assistance and		government assistance i luded it on <i>Schedule I:</i> \				Your expe	enses
		r home owners d any rent for the		ses for your residence. I r lot.	nclude first mortgage	e 4.	\$_		1,010.31
If n	not includ	ed in line 4:							
4a.	. Real e	state taxes				4a.	\$		235.48
4b.	Proper	rty, homeowner's	s, or renter	's insurance		4b.	_		75.00
4c.			•	ipkeep expenses		4c.			100.00
4d.		owner's associat				4d.			0.00
5. Ad	ditional n	nortgage payme	ents for yo	our residence, such as ho	me equity loans	5.	\$		0.00

	ıl H. Cerovac, Jr. bila A. Cerovac	Case num	ber (if known)	
Utilities:				
	etricity, heat, natural gas	6a.	\$	215.00
	er, sewer, garbage collection	6b.		135.00
	ephone, cell phone, Internet, satellite, and cable services	6c.		250.00
	er. Specify:	6d.		0.00
	housekeeping supplies	— ou. 7.		
			·	1,200.00
	and children's education costs	8.	·	75.00
	laundry, and dry cleaning	9.	· ·	125.00
	care products and services	10.	· -	100.00
Medical a	nd dental expenses	11.	\$	150.00
Transpor	tation. Include gas, maintenance, bus or train fare.	40	•	250.00
	lude car payments.	12.	· .	250.00
Entertain	ment, clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
Charitable	e contributions and religious donations	14.	\$	0.00
Insurance) <u>.</u>			
	lude insurance deducted from your pay or included in lines 4 or 20.			
15a. Life	insurance	15a.	\$	24.00
15b. Hea	Ith insurance	15b.	\$	0.00
15c. Veh	icle insurance	15c.	\$	260.00
15d. Oth	er insurance. Specify:	15d.	\$	0.00
	not include taxes deducted from your pay or included in lines 4 or 20.			
Specify:	City of Brunswick	16.	\$	100.00
	nt or lease payments: payments for Vehicle 1	17a.	\$	448.00
	• •	17b.	·	
	payments for Vehicle 2		·	450.00
	er. Specify:	17c.	· -	0.00
	er. Specify:	17d.	\$	0.00
	ments of alimony, maintenance, and support that you did not report as	10	¢	0.00
	from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.		
	ments you make to support others who do not live with you.		\$	0.00
Specify:		19.		
	property expenses not included in lines 4 or 5 of this form or on Schee			
	tgages on other property	20a.		0.00
20b. Rea	l estate taxes	20b.	\$	0.00
20c. Pro	perty, homeowner's, or renter's insurance	20c.	\$	0.00
20d. Mai	ntenance, repair, and upkeep expenses	20d.	\$	0.00
	neowner's association or condominium dues	20e.	\$	0.00
Other: Sp			+\$	0.00
55 0 p			. •	0.00
Calculate	your monthly expenses			
22a. Add I	ines 4 through 21.		\$	5,302.79
	line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$,
	ine 22a and 22b. The result is your monthly expenses.		\$	5,302.79
	your monthly net income.		Ψ	5,302.79
		23a.	¢	E 000 00
	y line 12 (your combined monthly income) from Schedule I.			5,368.98
23b. Cop	y your monthly expenses from line 22c above.	23b.	-\$	5,302.79
	tract your monthly expenses from your monthly income.	230	\$	66.19
	result is your monthly net income.	23c.		00.19
For exampl modification	spect an increase or decrease in your expenses within the year after youe, do you expect to finish paying for your car loan within the year or do you expect your to the terms of your mortgage?			ase or decrease because of a
■ No. □ Yes.				
	Explain here:			

Fill in this is	formation to identify your	2222						
riii in unis in	formation to identify your	case.						
Debtor 1	Paul H. Cerovac, J	r. Middle Name	Loot Name					
Debtor 2		Middle Name	Last Name					
(Spouse if, filing)	Sheila A. Cerovac	Middle Name	Last Name					
United States	s Bankruptcy Court for the:	NORTHERN DISTRIC	T OF OHIO					
	, ,							
Case numbe	r			Charle if this is an				
(II KIIOWII)				☐ Check if this is an amended filing				
If two marrie You must file obtaining mo years, or bot	Declaration About an Individual Debtor's Schedules f two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.							
	Sign Below I pay or agree to pay some	one who is NOT an atto	orney to help you fill out bankrup	tcy forms?				
■ No								
_	s. Name of person			Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)				
	enalty of perjury, I declare y are true and correct.	that I have read the su	mmary and schedules filed with	his declaration and				
X /s/ [Paul H. Cerovac, Jr.		X /s/ Sheila A. Cero	/ac				
Pau	ıl H. Cerovac, Jr.		Sheila A. Cerovac					
Sigr	nature of Debtor 1		Signature of Debtor	2				
Date	November 1, 2019		Date November	1, 2019				

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Filli	n this information to ide	ntify your case				
Debt	tor 1 Paul H. C	Cerovac, Jr.	Middle Name	Last Name		
Debt		Cerovac				
(Spou	se if, filing) First Name		Middle Name	Last Name		
Unite	ed States Bankruptcy Cou	rt for the: NC	RTHERN DISTRICT	OF OHIO		
Case (if kno	e number wn)				-	Check if this is an mended filing
Sta Be as	s complete and accurate	as possible. If needed, attach	two married people		ankruptcy equally responsible for sup additional pages, write you	
Part	1: Give Details About	Your Marital S	tatus and Where You	Lived Before		
1.	What is your current mar	rital status?				
	MarriedNot married					
2.	During the last 3 years, h	nave you lived a	anywhere other than	where you live now?		
	■ No □ Yes. List all of the pla	ces you lived in	the last 3 years. Do n	ot include where you live now	·.	
	Debtor 1 Prior Address:		Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory	
	■ No □ Yes. Make sure you f	ill out <i>Schedule</i>	H: Your Codebtors (O		, , , ,	,
Part	2 Explain the Source	es of Your Inco	me			
	Fill in the total amount of ir	ncome you rece	ved from all jobs and	ng a business during this yeall businesses, including parter together, list it only once ur		ndar years?
	□ No■ Yes. Fill in the details					
		Debt	or 1		Debtor 2	
		Sour	ces of income k all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	n January 1 of current ye date you filed for bankru	ntcv v	ages, commissions, ses, tips	\$69,258.35	☐ Wages, commissions, bonuses, tips	\$0.00
		ПО	narating a husiness		☐ Operating a business	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

		De	btor 1		Debtor 2	
			urces of income eck all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
or last cale anuary 1 to	ndar year: December		Wages, commissions, nuses, tips	\$78,711.00	☐ Wages, commissions, bonuses, tips	\$0.0
			Operating a business		☐ Operating a business	
	ndar year be December	21 2017 \	Wages, commissions, nuses, tips	\$80,805.43	☐ Wages, commissions, bonuses, tips	\$8,908.0
			Operating a business		Operating a business	
■ No	source and t	-	rom each source separat	ely. Do not include income th	at you listed in line 4.	
		Del	otor 1		Debtor 2	
		So	urces of income scribe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
rt 3: Lis	t Certain Pa	yments You Mad	e Before You Filed for I	Bankruptcy		
		ebtor 1 nor Debto	bts primarily consumer or 2 has primarily consu conal, family, or househol	mer debts. Consumer debts	are defined in 11 U.S.C. § 10	01(8) as "incurred by a
Are eithe ☐ No.	individual p		•			
_	individual p	90 days before yo	•	d you pay any creditor a total	of \$6,825* or more?	
_	individual p	90 days before you Go to line 7. List below each paid that credito	ou filed for bankruptcy, did creditor to whom you paid r. Do not include paymen	d you pay any creditor a total d a total of \$6,825* or more ir ts for domestic support obliga	n one or more payments and	
_	individual p During the No. Yes	90 days before your Go to line 7. List below each paid that credito not include payr	ou filed for bankruptcy, did creditor to whom you paid r. Do not include payment nents to an attorney for the	d you pay any creditor a total d a total of \$6,825* or more ir ts for domestic support obliga	n one or more payments and ations, such as child support	and alimony. Also, do
□ No.	individual puring the No. Yes	90 days before you Go to line 7. List below each paid that credito not include payr to adjustment on 4 or Debtor 2 or bo	creditor to whom you paid r. Do not include paymen nents to an attorney for the 4/01/22 and every 3 years th have primarily consu	d you pay any creditor a total d a total of \$6,825* or more in ts for domestic support obligations bankruptcy case. s after that for cases filed on o	n one or more payments and ations, such as child support or after the date of adjustmen	and alimony. Also, do
□ No.	individual puring the No. Yes	90 days before you Go to line 7. List below each paid that credito not include payr to adjustment on 4 or Debtor 2 or bo	creditor to whom you paid r. Do not include paymen nents to an attorney for the 4/01/22 and every 3 years th have primarily consu	d you pay any creditor a total d a total of \$6,825* or more in ts for domestic support obligations bankruptcy case. It is after that for cases filed on the mer debts.	n one or more payments and ations, such as child support or after the date of adjustmen	and alimony. Also, do
□ No.	individual puring the No. Yes * Subject Debtor 1 co	90 days before you Go to line 7. List below each paid that credito not include payr to adjustment on 4 or Debtor 2 or bound 90 days before you Go to line 7. List below each include paymen	creditor to whom you paid r. Do not include payment nents to an attorney for the	d you pay any creditor a total d a total of \$6,825* or more in ts for domestic support obligations bankruptcy case. It is after that for cases filed on the mer debts.	on one or more payments and ations, such as child support or after the date of adjustment of \$600 or more?	and alimony. Also, do nt. at creditor. Do not

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	otor 1 Paul H. Cerovac, Jr. Sheila A. Cerovac		Cas	se number (if known)		
	Within 1 year before you filed for bankrupt <i>Insiders</i> include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	artners; relatives of any gen control, or owner of 20% o	eral partners; partner r more of their voting	erships of which yo g securities; and a	u are a general ny managing ag	partner; corporations ent, including one for
	■ No□ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for th	nis payment
	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos		ments or transfer a	any property on a	ccount of a dek	ot that benefited an
	■ No □ Yes. List all payments to an insider					
	☐ Yes. List all payments to an insider Insider's Name and Address	Dates of payment	Total amount	Amount you still owe	Reason for th	
Dord	t 4: Identify Legal Actions, Repossession	no and Farceleaures	paid	Still Owe	include crediti	or s name
 Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions modifications, and contract disputes. No Yes. Fill in the details. 						
	Case title Case number	Nature of the case	Court or agency		Status of the	case
	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below		erty repossessed, f	oreclosed, garnis	shed, attached,	seized, or levied?
	No. Go to line 11.					
	Yes. Fill in the information below.					VI 641
	Creditor Name and Address	Describe the Property Explain what happened	•	Date		Value of the property
 Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts fro accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. 					nounts from your	
	Creditor Name and Address	Describe the action the	creditor took	Date taken	action was	Amount
	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a		erty in the possess	ion of an assigne	e for the benefi	it of creditors, a
	No					
	☐ Yes					
Part	t 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrup No	otcy, did you give any gifts	s with a total value	of more than \$60	0 per person?	
	Yes. Fill in the details for each gift. Gifts with a total value of more than \$600	Describe the gifts		Dates	s you gave	Value
	per person Person to Whom You Gave the Gift and Address:	, and the second		the g		

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	otor 1 Paul H. Cerovac, Jr. Sheila A. Cerovac		Case number (if known)	
14.	Within 2 years before you filed for bankr ■ No □ Yes. Fill in the details for each gift or c		utions with a total value of more tha	n \$600 to any charity?
	Gifts or contributions to charities that t more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code	otal Describe what you contribute	d Dates you contributed	Value
Par	t 6: List Certain Losses			
15.	Within 1 year before you filed for bankru or gambling?	ptcy or since you filed for bankruptcy,	did you lose anything because of th	eft, fire, other disaster,
	■ No □ Yes. Fill in the details.			
	Describe the property you lost and how the loss occurred	Describe any insurance coverage for the Include the amount that insurance has painsurance claims on line 33 of Schedule	aid. List pending	Value of property lost
Par	t 7: List Certain Payments or Transfers		, ,	
	Within 1 year before you filed for bankru consulted about seeking bankruptcy or placed any attorneys, bankruptcy petition position of the consultation of the consulta	preparing a bankruptcy petition?		
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y	Description and value of any transferred	property Date payment or transfer was made	Amount of payment
	Within 1 year before you filed for bankru promised to help you deal with your cred Do not include any payment or transfer that	ditors or to make payments to your cre-		erty to anyone who
	■ No □ Yes. Fill in the details.			
	Person Who Was Paid Address	Description and value of any transferred	property Date payment or transfer was made	Amount of payment
	Within 2 years before you filed for bankr transferred in the ordinary course of you include both outright transfers and transfers include gifts and transfers that you have alm. No	or business or financial affairs? s made as security (such as the granting of		
	Yes. Fill in the details.			
	Person Who Received Transfer Address Person's relationship to you	Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
19.	Within 10 years before you filed for bank beneficiary? (These are often called asset		o a self-settled trust or similar device	e of which you are a
	■ No □ Yes. Fill in the details.			
	Name of trust	Description and value of the p	property transferred	Date Transfer was made

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Pai	tt 8: List of Certain Financial Accounts, Ins	struments, Safe Deposi	t Boxes, and Sto	orage Unit	s				
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.								
	■ No □ Yes. Fill in the details.								
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	int or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer			
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?								
	■ No □ Yes. Fill in the details.								
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe t	the contents	Do you still have it?			
22.	Have you stored property in a storage unit of	or place other than your	home within 1	year befor	e you filed for bankrupto	y?			
	■ No □ Yes. Fill in the details.								
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)			the contents	Do you still have it?			
Pa	rt 9: Identify Property You Hold or Control	for Someone Else							
23.	Do you hold or control any property that sor for someone.	meone else owns? Incl	ude any propert	y you borr	owed from, are storing f	or, or hold in trust			
	■ No								
	Yes. Fill in the details.	Maria de 18		D	th	Valor			
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value			
Pa	rt 10: Give Details About Environmental Info	ormation							
For	the purpose of Part 10, the following definition	ons apply:							
	Environmental law means any federal, state toxic substances, wastes, or material into the regulations controlling the cleanup of these	ne air, land, soil, surface	e water, ground						
	Site means any location, facility, or property to own, operate, or utilize it, including dispo		environmental la	aw, wheth	er you now own, operate	, or utilize it or used			
	Hazardous material means anything an envi hazardous material, pollutant, contaminant,		as a hazardous	waste, haz	zardous substance, toxid	substance,			
Rep	ort all notices, releases, and proceedings that	at you know about, rega	ardless of when	they occu	rred.				
24.	Has any governmental unit notified you that	you may be liable or po	otentially liable	under or i	n violation of an environi	mental law?			
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental un Address (Number, S ZIP Code)			onmental law, if you it	Date of notice			

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	otor 1 Paul H. Cerovac, Jr. Sheila A. Cerovac		Case number (if known)						
25.	Have you notified any governmental unit of	of any release of hazardous material?							
23.	nave you notined any governmental unit t	or any release of flazardous filaterial?							
	No								
	Yes. Fill in the details.	Cavaramantal unit	Environmental law if you	Data of nation					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
26.	Have you been a party in any judicial or ac	dministrative proceeding under any envir	onmental law? Include settlements	and orders.					
	No								
	Yes. Fill in the details.								
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case					
Par	t 11: Give Details About Your Business o	or Connections to Any Business							
27.	Within 4 years before you filed for bankru	ntcy did you own a business or have any	of the following connections to a	ny husiness?					
		l in a trade, profession, or other activity, o	•	ly business.					
	<u> </u>		-						
	_	npany (LLC) or limited liability partnership	(LLP)						
	☐ A partner in a partnership								
	☐ An officer, director, or managing e	executive of a corporation							
	☐ An owner of at least 5% of the voti	er of at least 5% of the voting or equity securities of a corporation							
	■ No. None of the above applies. Go to	Part 12.							
	☐ Yes. Check all that apply above and f	ill in the details below for each business.							
	Business Name	Describe the nature of the business	Employer Identification numb	er					
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security	/ number or ITIN.					
	(,, , ,	Name of accountant of bookkeeper	Dates business existed						
28.	Within 2 years before you filed for bankru institutions, creditors, or other parties.	ptcy, did you give a financial statement to	o anyone about your business? Inc	lude all financial					
	■ No								
	Yes. Fill in the details below.								
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued							
Par	t 12: Sign Below								
are with	ve read the answers on this Statement of F rue and correct. I understand that making a bankruptcy case can result in fines up to	a false statement, concealing property, o	r obtaining money or property by f						
18 L	.S.C. §§ 152, 1341, 1519, and 3571.								
	Paul H. Cerovac, Jr.	/s/ Sheila A. Cerovac							
	ıl H. Cerovac, Jr. nature of Debtor 1	Sheila A. Cerovac Signature of Debtor 2							
Dat		Date November 1, 2019							
ריי	you attach additional pages to Your Staten	<u> </u>	iling for Pankruntov (Official Form	107\2					
		ment of Financial Ariali's for individuals Fi	ming for Bankrupicy (Official Form	107)?					
 □ Y									
Did	you pay or agree to pay someone who is n	ot an attorney to help you fill out bankrup	otcy forms?						
	es. Name of Person Attach the Bank								
		ement of Financial Affairs for Individuals Filing	tor Bankruptcy	page 6					
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Fill in this informa	ation to identify your o	ase:		
Debtor 1	Paul H. Cerovac, J	r. Middle Name	Last Name	
Debtor 2 (Spouse if, filling)	Sheila A. Cerovac	Middle Name	Last Name	
	kruptcy Court for the:	NORTHERN DISTRICT		
Case number				☐ Check if this is an amended filing

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's Ally Financial name:	☐ Surrender the property. ☐ Retain the property and redeem it.	■ No
Description of property securing debt: 2015 Dodge Dart 100000 miles Good condition; value per KBB private party value - Debtor is co-signor for adult child, adult child makes all payments for loan, maintenance, and insurance related to vehicle.	 ■ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	☐ Yes
Creditor's Loancare Servicing Ctr name:	☐ Surrender the property.☐ Retain the property and redeem it.	■ No
Description of property securing debt: 1607 Eastwood Drive Brunswick, OH 44212 Medina County PPN: 003-18D-08-254, value per Medina County Auditor	■ Retain the property and enter into a Reaffirmation Agreement.□ Retain the property and [explain]:	☐ Yes
Creditor's Regional Finance Corp	■ Surrender the property.	■ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 1

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Debtor 1 Paul H. Cerovac, Jr. Debtor 2 Sheila A. Cerovac	Case number (if known)	
Description of property Good condition; value per KBB securing debt:	 □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	□ Yes
Creditor's Shaker Heights Fed. Credit Union name: Description of 2010 Dodge Journey 175000 miles Good condition; value per KBB private party value Part 2: List Your Unexpired Personal Property Leases	 □ Surrender the property. □ Retain the property and redeem it. ■ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	□ No ■ Yes
For any unexpired personal property lease that you listed in the information below. Do not list real estate leases. Ut You may assume an unexpired personal property lease if	I in Schedule G: Executory Contracts and Unexpire nexpired leases are leases that are still in effect; the	e lease period has not yet ended.
Describe your unexpired personal property leases		Will the lease be assumed?
Lessor's name: Description of leased Property:		□ No □ Yes
•		
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Lessor's name: Description of leased		□ No
Property:		☐ Yes
Lessor's name: Description of leased		□ No
Property:		☐ Yes
Part 3: Sign Below		
Under penalty of perjury, I declare that I have indicated m property that is subject to an unexpired lease.	y intention about any property of my estate that see	cures a debt and any personal
X /s/ Paul H. Cerovac, Jr.	X /s/ Sheila A. Cerovac	
Official Form 108 Statement of I	ntention for Individuals Filing Under Chapter 7	page 2

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Debtor 1 Paul H. Cerovac, Jr. Debtor 2 Sheila A. Cerovac	Case number (if known)		
Paul H. Cerovac, Jr.	Sheila A. Cerovac		
Signature of Debtor 1	Signature of Debtor 2		
Date November 1, 2019	Date November 1, 2019		

November 1, 2019

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 3

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November 1, 2019

Fill in this information to identify your case:					
Debtor 1	Paul H. Cerovac, Jr.				
Debtor 2 (Spouse, if filing)	Sheila A. Cerovac				
United States Bankruptcy Court for the: Northern District of Ohio					
Case number (if known)					

Check one box	only as	directed	in this	form	and i	n Fo	rm
122A-1Supp:							

- 1. There is no presumption of abuse
- 2. The calculation to determine if a presumption of abuse applies will be made under *Chapter 7 Means Test* Calculation (Official Form 122A-2).
- □ 3. The Means Test does not apply now because of qualified military service but it could apply later.

Column B

☐ Check if this is an amended filing

Official Form 122A - 1

Chapter 7 Statement of Your Current Monthly Income

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file *Statement of Exemption from Presumption of Abuse Under § 707(b)(2)* (Official Form 122A-1Supp) with this form.

Part 1: Calculate Your Current Monthly Income

- 1. What is your marital and filing status? Check one only.
 - □ Not married. Fill out Column A, lines 2-11.
 - Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.
 - ☐ Married and your spouse is NOT filing with you. You and your spouse are:
 - ☐ Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.
 - □ Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C § 707(b)(7)(B).

Column A

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

 Your gross wages, salary, tips, bonuses, overtime payroll deductions). Alimony and maintenance payments. Do not include Column B is filled in. 	,	mmissio	ons (before all		
• • •	de payme			\$ 7,597.77	\$ 0.00
Column B is inica in:	. ,	ents from	a spouse if	\$ 0.00	\$ 0.00
All amounts from any source which are regularly of you or your dependents, including child support from an unmarried partner, members of your househout and roommates. Include regular contributions from a filled in. Do not include payments you listed on line 3.	rt. Includ old, your spouse o	e regular depende	contributions nts, parents,	\$ 0.00	\$ 0.00
Net income from operating a business, profession	n, or farn				
		Deb	tor 1		
Gross receipts (before all deductions)	\$	0.00			
Ordinary and necessary operating expenses	-\$	0.00			
Net monthly income from a business, profession, or f	arm \$	0.00	Copy here ->	\$ 0.00	\$ 0.00
Net income from rental and other real property					
		Deb	tor 1		
Gross receipts (before all deductions)	\$	0.00			
Ordinary and necessary operating expenses	-\$	0.00			
Net monthly income from rental or other real property	\$	0.00	Copy here ->	\$ 0.00	\$ 0.00
Interest, dividends, and royalties				\$ 0.00	\$ 0.00

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

page 1

Best Case Bankruptcy

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				Column A Debtor 1		Column B Debtor 2 o	-
8.	Unemployment compensation			\$	0.00	\$	0.00
	Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:		t under				
	For you\$						
_	For your spouse \$	0.0					
9.	Pension or retirement income. Do not include any ambenefit under the Social Security Act. Also, except as structured any compensation, pension, pay, annuity, or United States Government in connection with a disability disability, or death of a member of the uniformed service pay paid under chapter 61 of title 10, then include that process and exceed the amount of retired pay to which you if retired under any provision of title 10 other than chapter	tated in the next senter r allowance paid by the ry, combat-related injur- es. If you received any pay only to the extent the I would otherwise be er	nce, do e y or retired nat it	\$	0.00	\$	0.00
10	Income from all other sources not listed above. Spe Do not include any benefits received under the Social S received as a victim of a war crime, a crime against hur domestic terrorism; or compensation, pension, pay, and United States Government in connection with a disabilit disability, or death of a member of the uniformed servic sources on a separate page and put the total below.	Security Act; payments manity, or international nuity, or allowance paid y, combat-related injury	or by the y or				
	Babysitting			\$	0.00	\$	500.00
				\$	0.00	\$	0.00
	Total amounts from separate pages, if any.		+	\$	0.00	\$	0.00
11	Calculate your total current monthly income. Add line each column. Then add the total for Column A to the total for Column B to the total for Column	tal for Column B.	\$	7,597.77	+ \$	500.00	Total current monthly income
12	Calculate your current monthly income for the year.	. Follow these steps:					
	12a. Copy your total current monthly income from line 1	1		Сор	y line 11 l	nere=>	\$8,097.77_
	Multiply by 12 (the number of months in a year)						x 12
	12b. The result is your annual income for this part of the	e form				12b	97,173.24
13	Calculate the median family income that applies to	you. Follow these step	s:				
	Fill in the state in which you live.	ОН					
	Fill in the number of people in your household.	6					
	Fill in the median family income for your state and size To find a list of applicable median income amounts, go for this form. This list may also be available at the bank	online using the link sp	ecified	in the separ	ate instruc	13. tions	\$109,580.00_
14	How do the lines compare?						
	 Line 12b is less than or equal to line 13. O Go to Part 3. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2. 	1 1 0 /		•	•	•	
Pari	•						
	By signing here, I declare under penalty of perjury	that the information on	this sta	atement and	l in any atta	achments is t	rue and correct.
	X /s/ Paul H. Cerovac, Jr.	Y /s	s/ Sheil	a A. Cerov	/ac		
	- · · · · · · · · · · · · · · · · · · ·		<i>"</i> <u> </u>	u 71. 00101	- uo		
	Paul H. Cerovac, Jr. Signature of Debtor 1	S	heila A	A. Cerovac e of Debtor			

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

Paul H. Cerovac, Jr. Sheila A. Cerovac	Case number (if known)	
Date November 1, 2019 MM / DD / YYYY	Date November 1, 2019 MM / DD / YYYY	
If you checked line 14a, do NOT fill out or file Form 122/	1 -2	

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Official Form 122A-1

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapte	er 7:	Liquidation
	\$245	filing fee
	\$75	administrative fee
<u>+</u>	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	¢310	total foo

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

United States Bankruptcy Court Northern District of Ohio

In #0	Paul H. Cerovac, Jr.		Casa Na		
In re	Sheila A. Cerovac	Debtor(s)	Case No. Chapter	7	
			-		
	DISCLOSURE OF COMP	PENSATION OF ATTOI	RNEY FOR D	EBTOR(S)	
c	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 20 compensation paid to me within one year before the fee rendered on behalf of the debtor(s) in contemplation	filing of the petition in bankruptcy,	or agreed to be paid	l to me, for services rende	ered or to
	For legal services, I have agreed to accept		\$	900.00	
	Prior to the filing of this statement I have receiv			0.00	
				900.00	
2. \$	6 335.00 of the filing fee has been paid.				
3. T	The source of the compensation paid to me was:				
	☐ Debtor ■ Other (specify): \$90	00 paid by Debtor's Employer-sp	onsored legal ser	vice plan	
4. T	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5. I	I have not agreed to share the above-disclosed co	empensation with any other person	unless they are mer	nbers and associates of my	y law firm.
I	☐ I have agreed to share the above-disclosed composition of the agreement, together with a list of the				firm. A
6. I	In return for the above-disclosed fee, I have agreed to	o render legal service for all aspect	s of the bankruptcy	case, including:	
b c d	Analysis of the debtor's financial situation, and recovered to the debtor at the meeting of credit Representation of the debtor at the meeting of credit Representation of the debtor in adversary proceeds. [Other provisions as needed] Negotiations with secured creditors to reagreements and applications as needed of liens on household goods.	statement of affairs and plan which ditors and confirmation hearing, and lings and other contested bankrupto educe to market value; exemption	n may be required; and any adjourned he by matters; on planning; prepa	arings thereof;	irmation
7. E	By agreement with the debtor(s), the above-disclosed Representation of the debtors in any disadversary proceeding.			ef from stay actions or a	any other
		CERTIFICATION			
	certify that the foregoing is a complete statement of ankruptcy proceeding.	any agreement or arrangement for	payment to me for	representation of the debte	or(s) in
No	ovember 1, 2019	/s/ Christopher L. \	Wetherbee		
Do	ate	Christopher L. We			
		Signature of Attorne Oberholtzer & Filo			
		39 Public Square,			
		Medina, OH 44258	3-0220		
		330-725-4929 Fa counsel@medinal			
		Name of law firm	aw.com		-
		Trance of tan film			

United States Bankruptcy Court Northern District of Ohio

In re	Paul H. Cerovac, Jr. Sheila A. Cerovac		Case No.
		Debtor(s)	Chapter 7
	VERI	FICATION OF CREDITOR	MATRIX
The ab	ove-named Debtors hereby verify the	hat the attached list of creditors is true and co	prrect to the best of their knowledge.
Date:	November 1, 2019	/s/ Paul H. Cerovac, Jr.	
		Paul H. Cerovac, Jr. Signature of Debtor	
		Signature of Debior	
Date:	November 1, 2019	/s/ Sheila A. Cerovac	
		Sheila A. Cerovac	
		Signature of Debtor	

Ally Financial P.o. Box 380901 Bloomington, MN 55438

Amsher Collection Serv 4524 Southlake Parkway Hoover, AL 35244

Avant 222 N. Lasalle St Chicago, IL 60601

Cach Llc/resurgent Cap C/o Resurgent Capital Services Greenville, SC 29602

Capital One Bank Usa N Po Box 30281 Salt Lake City, UT 84130

Central Loan Admin & R Po Box 77404 Ewing, NJ 08628

Chrysler Capital Po Box 961212 Fort Worth, TX 76161

City of Brunswick 4383 Center Road Brunswick, OH 44212

Enhanced Recovery Co L 8014 Bayberry Rd Jacksonville, FL 32256

First Premier Bank 601 S Minnesota Ave Sioux Falls, SD 57104

Frontier Communication 19 John St Middletown, NY 10940 Cerovac, Jr., Paul and Sheila -

Gm Financial Po Box 181145 Arlington, TX 76096

I C System Inc Po Box 64378 Saint Paul, MN 55164

I.c. System, Inc Po Box 64378 Saint Paul, MN 55164

Jared-galleria Of Jwlr 375 Ghent Rd Fairlawn, OH 44333

Jefferson Capital Syst 16 Mcleland Rd Saint Cloud, MN 56303

Loancare Servicing Ctr 3637 Sentara Way Virginia Beach, VA 23452

Prfrd Cus Ac Po Box 94498 Las Vegas, NV 89193

Regional Finance Corp 2676 E Aurora Rd Twinsburg, OH 44087

Resurgent Care Of Resurgent Capital Serv Greenville, SC 29602

Revenue Group 3700 Park East Drive Beachwood, OH 44122

Shaker Heights Fed. Credit Union 3450 Lee Road, Room 205 Shaker Heights, OH 44120

Cerovac, Jr., Paul and Sheila -

Syncb/care Credit C/o Po Box 965036 Orlando, FL 32896

Team Recovry 3928 Clock Pointe Trail Stow, OH 44224

Verizon Wireless Po Box 49 Lakeland, FL 33802

Webbank/fingerhut 6250 Ridgewood Road Saint Cloud, MN 56303

Wf/preferr Po Box 14517 Des Moines, IA 50306